

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.orgWeb site: www.hawaii.gov/ethics

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NOTE: This is a public document.

LOBBYIST REGISTRATION FORM STATE OF HAWAII
(Type or Print Clearly) STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Radcliffe	John	Henry	(808) 524-4459
MAILING ADDRESS (Street)			FAX (808) 599-4340
222 South Vineyard Street, Suite 401			EMAIL hawaiilobbyist@aol.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813-2453	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Radcliffe & Associates, LLC			(808) 524-4459
MAILING ADDRESS (Street)			FAX (808) 599-4340
222 South Vineyard Street, Suite 401			EMAIL hawaiilobbyist@aol.com
(City)	(State)	(Zip Code)	
Honolulu	HI	96813	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Kapolei Property Development, LLC		(808) 674-3117
MAILING ADDRESS (Street)		FAX (808) 674-3349
1001 Kamokila Boulevard, Suite 200		EMAIL daver@kapolei.com
(City)	(State)	(Zip Code)
Kapolei	HI	96707
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Melody Butay Dacanay		(808) 531-4551
MAILING ADDRESS (Street)		FAX (808) 533-4601
222 South Vineyard Street, Suite 401		EMAIL mbutay@aol.com
(City)	(State)	(Zip Code)
Honolulu	HI	96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

(Signature of Lobbyist)

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

David W. Rae

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Senior Vice President, Development

NAME OF ORGANIZATION (if applicable)

Kapolei Property Development, LLC

TELEPHONE

(808) 674-3117

MAILING ADDRESS (Street)

1001 Kamokila Boulevard, Suite 200

FAX (808) 674-3349

EMAIL

Thelma.L.Harris@gsk.com

(City)

Kapolei

(State)

HI

(Zip Code)

96707

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

(Date)